



APPLICATION FOR CONDITIONAL USE

TO: The Zoning Board of the Town of Callahan

The undersigned hereby applies for a Conditional Use as follows:

1. Legal description of property upon which a Conditional Use is sought:

Lot _____ Block _____

Subdivision _____

Other _____

2. Location: On _____ side of _____
(number) (street)

between _____ and _____
(street) (street)

3. The name and address of the owner as shown in the public record of
Nassau County: _____

4. Current Zoning Classification: _____

5. Conditional Use Sought: _____

6. The names and addresses of all owners of property within 300 feet of the
parcel upon which a Conditional Use is sought.

7. Section of Zoning Code from which the Conditional Use is sought: _____

8. The reasons this Conditional Use is being sought: _____

9. Supporting data which should be considered by the Board: _____

10. Has any application been made within a year for a Conditional Use of
this property? _____

If so, give details and final disposition: _____

In filing this application for a Conditional Use, the undersigned understands
it becomes a part of the official records of the Zoning Board and does hereby
certify that all information contained herein is true to the best of his/her
knowledge.

Signature of Owner _____

Signature of Agent _____

Address _____

Telephone No. _____